Alabama Department of Human Resources **Continuums of Care**



Minutes Continuum of Care Services Workgroup October 31, 2005

The meeting began at 9:30 AM and was held at the Richard Dorrough Training Facility. Provider representatives present were Bill Thompson, Glenwood; Jim Loop, Gateway; Laura Cooper, LCYDC; Bill Mitchell, TPI; Margie Robinson, UMCH and Michelle Grabarczyk, Youth Villages. Attending from DHR were Wanda Davidson and Melanie Graham, Office of Foster Care; Cathy Leverington, Covington County; Sandy Arthur, Office of Family Preservation and Support; Paul Butler, Family Services Director; Jan Burke, Lee County; Alice May, Office of Financial Resource Management; Reba Cantrell, Family Services Administrator and Sue Ash, Office of Child Protective Services.

Reba Cantrell provided general information regarding the Continuums of Care, the other sub-committees, tasks to be completed by each committee and the developmental timeline for the Continuum. Questions are to be submitted to Starr Stewart (ssstewart@dhr.state.al.us). Recommendations from each committee as well as questions and answers will be posted on the DHR Web Site.

Discussions in this group centered on identifying placement types and core services within each type. The seven placement types identified are Inhome; Traditional Foster Care; Therapeutic Foster Care; Basic Residential; Moderate Residential, Intensive Residential and ILP/Transitional Living.

In Home Services

- Core Services:
 - Clinical services (assessment, psychiatric services, med. Monitoring)
 - Treatment Services
 - Individual and family counseling services.
 - Access to or provision for hard services (i.e. housing, furniture, food, etc.)
 - Access to or provision for transportation.
 - Development of parental capacity through parent education

- Basic Living Skills
- Family Support Services
- Medicaid rehabilitation services.
- Family Advocacy (i.e. legal, educational, medical, mental health, etc.)
- Provision of or facilitation of substance abuse assessment, treatment, substance abuse testing, monitoring and recovery support.

Therapeutic Foster Care

- TFC providers will provide traditional foster homes only as part of the step down process.
- Core Services:
 - Clinical services (assessment, psychiatric services, med. Monitoring)
 - Utilize current core services for In-home.
 - Utilize current core services for TFC that are currently in place.
 - ILP Services to be coordinated with county DHR staff (when applicable.

Basic Residential

- Core Services:
 - Clinical services (assessment, psychiatric services, med. Monitoring)
 - Utilize current core services for Basic Residential.
 - Utilize current core services for In-home
 - ILP Services to be coordinated with county DHR staff (when applicable).

Moderate Residential

- Core Services:
 - Clinical services (assessment, psychiatric services, med. Monitoring)
 - Utilize current core services for Moderate Residential.
 - Utilize current core services for In-home services.

• ILP Services to be coordinated with county DHR staff (when applicable)

Intensive Residential

- Core Services:
 - Utilize current core services for Intensive Residential.
 - Utilize current core services for In-home services
 - ILP Services to be coordinated with county DHR staff (when applicable).

ILP/Transitional Placements

- Core Services:
 - Clinical services (assessment, psychiatric services, med. Monitoring)
 - Utilize current core services for Basic Residential
 - Utilize current core services for In- home.

Other Recommendations

- Services will continue to be directed by ISP.
- In-home core services must be available throughout the Continuum.
- Explore use of paraprofessionals or mentors to provide some services i.e. transportation, parent support, etc.)
- Providers must have the ability to provide or to facilitate the provision of substance abuse services (see In-home core services)
- Facilitation of reunification, step-down, or step up within the Continuum will be in the ISP.
- Flexibility needs to be built into the Continuum for service delivery and service identification.
- Respite services and crisis stabilization services need to be made part of the core services for In-home, traditional foster family and TFC placement types.

Comments and Questions

• Clarification on where Family Options and Family Preservation fit in the Continuum.

- Clarification needed on whether basic living skills for In-homes services can be provided in a group setting.
- Clarification needed regarding Medicaid billing to V62.9. Is there a difference in DHR's and Mental Health's use of this code?
- Concern of counties' inability to support their role in extra curricular activities for foster children.
- It would be helpful to have core services broken down into headings, i.e. core to families, administrative to providers.
- Will the Continuum require certification of a particular model such as Home Builders or MST? (Michelle Grabarczyk provide a web site, MST services.org for more information) (Sandy Arthur will provide a web site for Home Builders.)
- Will Recruitment and monitoring of traditional foster family homes remain the responsibility of DHR and not included in the Conitnuums.
- Will Traditional Foster Care will not be included in the Continuum?

The meeting was adjourned at 2:30 P.M.

Submitted by:

Sue Ash, Co-Chair, Services Sub-committee, Continuum of Care 11/03/05